
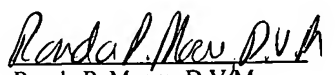


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 TRANSMITTAL FORM	Application Serial Number	10/716,896
	Filing Date	November 17, 2003
	First Named Inventor	Biondi
	Group Art Unit	Not Yet Assigned
	Examiner Name	Not Yet Assigned
	Attorney Docket No.	CPC-006C2
	Patent No.	Not applicable
	Issue Date	Not applicable

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Check Attached <input type="checkbox"/> Copy of Fee Transmittal Form <input checked="" type="checkbox"/> Amendment/Response <input checked="" type="checkbox"/> Preliminary (3 pgs.) <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets ____] <input type="checkbox"/> Petition for Extension of Time <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Form PTO-1449 <input type="checkbox"/> Copies of IDS Citations <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Sequence Listing submission <input type="checkbox"/> Paper Copy/CD <input type="checkbox"/> Computer Readable Copy <input type="checkbox"/> Statement verifying identity of above	<input type="checkbox"/> Copy of Notice to File Missing Parts of Application <input type="checkbox"/> Formal Drawing(s) <input type="checkbox"/> Request For Continued Examination (RCE) Transmittal <input type="checkbox"/> Power of Attorney (Revocation of Prior Powers) <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> CD(s) for large table or computer program <input type="checkbox"/> Amendment After Allowance <input type="checkbox"/> Request for Certificate of Correction <input type="checkbox"/> Certificate of Correction (in duplicate)	<input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences <input type="checkbox"/> Appeal Brief (in triplicate) <input type="checkbox"/> Status Inquiry <input checked="" type="checkbox"/> Return Receipt Postcard <input type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8 <input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8 <input type="checkbox"/> Additional Enclosure(s) (please identify below)

CORRESPONDENCE ADDRESS	SIGNATURE BLOCK
Direct all correspondence to: Patent Administrator Testa, Hurwitz & Thibault, LLP High Street Tower 125 High Street Boston, MA 02110 Tel. No.: (617) 248-7000 Fax No.: (617) 248-7100	Respectfully submitted,  Ronda P. Moore, D.V.M. Attorney for the Applicants Testa, Hurwitz & Thibault, LLP High Street Tower 125 High Street Boston, MA 02110



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PATENT
Attorney Docket No. CPC-006C2
(1419/6)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANTS: Biondi et al.
APPLICATION NO.: 10/716,896 ART UNIT: Not Yet Assigned
FILING DATE: November 17, 2003 EXAMINER: Not Yet Assigned
TITLE: A System for Automatically Weaning a Patient from a Ventilator, and
Method Thereof

Mail Stop Non-Fee Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

PRELIMINARY AMENDMENT

Sir:

Please amend the above-identified patent application as follows prior to examination:

Amendments to the Specification begin on page 2 of this Paper; and

Remarks begin on page 3 of this Paper.